

**AHCCCS NOTICE OF PUBLIC INFORMATION
INTENT TO SUBMIT A STATE PLAN AMENDMENT (SPA)**

Name of the Agency: Arizona Health Care Cost Containment System (AHCCCS)

The topic of the public information notice: Inform the public of AHCCCS'S intent to submit a State Plan Amendment (SPA).

SPA Title: Drug Utilization Review (DUR) Program

SPA Overview: This SPA describes AHCCCS's Drug Utilization Review Program for CMS covered outpatient drugs.

Tribal Consultation:

AHCCCS consulted with Tribes regarding this SPA on November 7, 2022. Below is a link to more information regarding the tribal consultation meeting.

https://www.azahcccs.gov/AmericanIndians/Downloads/Consultations/Meetings/2022/11_07_2022QuarterlyTC.pdf

State Plan Amendment and Public Comment Period

The proposed SPA is located on the next page of this document.

Public notice was posted on November 15, 2022

Comments will be accepted through December 30, 2022

Comments can be submitted through email or postal mail. The addresses where comments may be sent are provided below.

- Email:
publicinput@azahcccs.gov
- Postal Mail:
AHCCCS
Attn: Division of Community Advocacy and Intergovernmental Relations
801 E. Jefferson St., MD 4200
Phoenix, AZ 85034

Revision: ~~HCFA-PM-93-3~~ (MB)
~~April 1993~~

State/Territory: Arizona

Citation

4.26 Drug Utilization Review Program

1927(g)
42 CFR 456.700

A.1 The Medicaid agency meets the requirements of Section 1927(g) of the Act for a drug use review (DUR) program for outpatient drug claims.

2. The DUR program assures that prescriptions for [CMS covered](#) outpatient drugs are:
 - Appropriate
 - Medically necessary
~~- Are not likely to result in adverse medical results~~

1927(g)(1)(A)
42 CFR 456.705(g)
456.709(b)

B. The DUR program is designed to educate 42 CFR 456.705(b) and physicians and pharmacists to identify and reduce the frequency of patterns of fraud, abuse, gross overuse, or inappropriate or medically unnecessary care among physicians, pharmacists, and patients or associated with specific drugs as well as:

- Potential and actual adverse drug reactions
- Therapeutic appropriateness
- Overutilization and underutilization
- Appropriate use of generic products
- Therapeutic duplication
- Drug disease contraindications
- Drug-drug interactions
- Incorrect drug dosage or duration of drug treatment
- Drug-allergy interactions
- Clinical abuse/misuse

1927(g)(1)(B)
42 CFR 456.703 (d)
and (f)

C. The DUR program shall assess data use against predetermined standards whose source materials for their development are consistent with peer-reviewed medical literature which has been critically reviewed by unbiased independent experts and the following compendia:

- American Hospital Formulary Service Drug Information
- [Drug Facts and Comparisons](#)~~United States Pharmacopeia Drug Information~~
- [UpToDate](#)~~American Medical Association Drug Evaluations~~

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TN No. ~~93-26 22-xxxx~~
Supersedes TN No. 93-~~426~~

Approval Date: ~~02/02/94~~

Effective Date: ~~October 1, 1993~~

Revision: ~~HCFA-PM-93-3~~ (MB)
~~April 1993~~

State/Territory: Arizona

Citation

4.26 Drug Utilization Review Program (Cont'd)

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1927(g)(1)(D)
 42 CFR 456.703(b)
 42 CFR 483.60

- D. DUR is not required for drugs dispensed to Medicaid recipients residents located in of 42 CFR 456.703(b) nursing facilities 42 CFR 456.703(b) that are in compliance with drug regimen review procedures set forth in 42 CFR 483.60. The State has never-the-less chosen to include nursing home drugs in:
- Prospective DUR
 Retrospective DUR

1927(g)(1)(D)
 42 CFR 456.705(b)

- E.1. The DUR program includes prospective review of drug therapy at the point of sale or point of distribution before prescription is filled or dispensed/delivered to athe Medicaid recipient.

1927(g)(2)(A)(i)
 42 CFR 456.705(b)
 (1)-(7))

2. Prospective DUR includes screening each prescription filled or delivered to an individual receiving benefits for potential drug therapy problems due to:
- Therapeutic duplication
 - Drug-disease contraindications
 - Drug-drug interactions
 - Drug-interactions with non-prescription or over-the-counter drugs
 - Incorrect drug dosage or duration of drug treatment
 - Drug allergy interactions
 - Clinical abuse/misuse

1927(g)(2)(A)(ii)
 42 CFR 456.705(c)
 and (d)

3. Prospective DUR includes counseling for Medicaid recipients based on standards established by State law and maintenance of patient profiles.

1927(g)(2)(B)
 42 CFR 456.709(a)

- F.1. The DUR program includes retrospective DUR through its mechanized drug claims processing and information retrieval system or otherwise which undertakes ongoing periodic examination of claims data and other records to identify:
- Patterns of fraud and abuse
 - Gross overuse
 - Inappropriate or medically unnecessary care among physicians, pharmacists, Medicaid recipients, or associated with specific drugs or groups of drugs.

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TN ~~93-26-22-XXXX~~
 Supersedes TN No 93-~~426~~

Approval Date: 02/02/94

Effective Date: October 1, 1993

Revision: ~~HCFA-PM-93-3~~ (MB)
~~April 1993~~

State/Territory: Arizona

Citation

4.26 Drug Utilization Review Program (Cont'd)

1927(g)(2)(C)
42 CFR 456.709(b)

- F.2. The DUR program assesses data on drug use against explicit predetermined standards including but not limited to monitoring for:
- Therapeutic appropriateness
 - Overutilization and underutilization
 - Appropriate use of generic products
 - Therapeutic duplication
 - Drug-disease contraindications
 - Drug-drug interactions
 - Incorrect drug dosage/duration of drug treatment
 - Clinical abuse/misuse

1927(g)(2)(D)
42 CFR 456.711

3. The DUR program through its State DUR Board, using data provided by the Board, provides for active and ongoing educational outreach programs to educate practitioners on common drug therapy problems to improve prescribing and dispensing practices.

1927(g)(3)(A)
42 CFR 456.716(a)

- G.1. The DUR program has established a State DUR Board either:
- Directly, or
- Under contract with a private organization

1927(g)(3)(B)
42 CFR 456.716
(A) AND (B)

2. The DUR Board membership includes health professionals (one-third licensed actively practicing pharmacists and one-third but no more than 51 percent licensed and actively practicing physicians) with knowledge and experience in one or more of the following:
- Clinically appropriate prescribing of covered outpatient drugs
 - Clinically appropriate dispensing and monitoring of covered outpatient drugs
 - Drug use review, evaluation and intervention
 - Medical quality assurance.

927(g)(3)(C)
42 CFR 456.716(d)

3. The activities of the DUR Board include:
- Retrospective DUR,
 - Application of Standards as defined in section 1927(g)(2)(C), and
 - Ongoing interventions for physicians and pharmacists targeted toward therapy problems or individuals identified in the course of retrospective DUR.

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TN-~~93-26-22-xxxx~~
Supersedes TN No 93-~~426~~

Approval Date: 02/02/94

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4.26 Drug Utilization Review Program (Cont'd)

<p>1927(g)(3)(C) 42 CFR 456.711 (a)-(d)</p>	<p>G.4</p>	<p>The interventions include in appropriate instances:</p> <ul style="list-style-type: none"> - Information dissemination - Written, oral, and electronic reminders - Face-to-Face discussions - Intensified monitoring/review of prescribers/dispensers
<p>1927(g)(3)(D) 42 CFR 456.712 (A) and (B)</p>	<p>H.</p>	<p>The State assures that it will prepare and submit an annual report to the Secretary, which incorporates a report from the State DUR Board, and that the State will adhere to the plans, steps, procedures as described in the report.</p>
<p>1927(h)(1) 42 CFR 456.722</p>	<p>I.1.</p>	<p>The State establishes, as its principal means of processing claims for covered outpatient drugs under this title, a point-of-sale electronic claims management system to perform on-line:</p> <ul style="list-style-type: none"> - real time eligibility verification - claims data capture - adjudication of claims - assistance to pharmacists, etc. applying for and receiving payment.
<p>1927(g)(2)(A)(i) 42 CFR 456.705(b)</p>	<p>2.</p>	<p>Prospective DUR is performed using an electronic point of sale drug claims processing system.</p>

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TN ~~10-007-22-xxxx~~

Supersedes TN No ~~93-26-10-007~~

Approval Date: ~~Jan 26 2011~~

Effective Date: ~~March 23, 2010~~